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ı ı	NUMBER			(FACE)	17743	

NOTICE OF ALLOWANCE MAILED		CLAIMS ALLOWED					
		Assistant Examiner	Total Claims		Print Claim for O.G		
			DRAWING				
ISSUE FEE		4	Sheets Drwg.	Figs.Drv	Ng.	Print Fig.	
Amount Due	Date Paid				-		
		Primary Examiner					
TERMINAL		PREPARED FOR ISSUE	Application Examiner				
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